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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: PERLMAN, Daniel
Title: ALUMINUM FOIL CUPS FOR
COVERING LABORAORY
VESSELS
Appl. No.: 10/800,573
Filing Date: 03/15/2004
Examiner: Ramdhanie, Bobby
Art Unit: 1797
Confirm. No.: 1722

<p>CERTIFICATE OF MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as First Class Mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231, on the date below.</p> <p><u>Wesley B. Ames</u> (Printed Name)</p> <p><u><i>Wesley B. Ames</i></u> (Signature)</p> <p><u>09/12/2008</u> (Date of Deposit)</p>
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TRANSMITTAL

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Transmitted herewith is:

Form PTO/SB/81 (Power of Attorney;

Pursuant to the Power of Attorney submitted herewith, kindly change the Attorney Docket Number for this application to "PERL.10.01".

Please direct all correspondence to the undersigned attorney or agent at the address indicated below.

Respectfully submitted,

Date 9/12/2008
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By *Wesley B. Ames*
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OR
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AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/800, 573
Filing Date	03/15/2004
First Named Inventor	PERLMAN, Daniel
Title	
Art Unit	ALUMINUM FOIL CUPS FOR COVERING LABORATORY VESSEL
Examiner Name	Ramadhanie, Bobby
Attorney Docket Number	DVR5-003XX

I hereby revoke all previous powers of attorney given in the above-identified application.

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint Practitioner(s) associated with the following Customer Number as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

53400

OR

☐ I hereby appoint Practitioner(s) named below as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith:

Practitioner(s) Name	Registration Number

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I am the:

☒ Applicant/Inventor.

OR

☐ Assignee of record of the entire interest. See 37 CFR 3.71.

Statement under 37 CFR 3.73(b) (Form PTO/SB/96) submitted herewith or filed on _____

SIGNATURE of Applicant or Assignee of Record

Signature	<i>Daniel Perlman</i>	Date	Sep 11, 2008
Name	Daniel Perlman	Telephone	781-736-2428
Title and Company			

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☐ *Total of _____ forms are submitted.

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